CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received APR Office 1 2011

RECEIVED

TOWN OF MORAGA

NAME OF FILER ARM HOW	(AZI) - CARNES (M	IDDLE)
1. Office, Agency, or Court	THE CHAPTER STATES	14 076-
Agency Name 10WN 0+ Mal	^ag A	PR
Division, Board, Department, District, if applicable OUNCIMAN	Your Position	A CT I AP
▶ If filing for multiple positions, list below or on an attachment.		一 であ
Agency:	Position:	- CO - CO - CO - CO - CO - CO - CO - CO
2. Jurisdiction of Office (Check at least one box)		2: HC
☐ State	☐ Judge (Statewide Jurisdiction)	AL ISS
Multi-County	County of	
XICHTOF TOWN A MORAGIA	Other	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2010, through December 2010.	er 31, Leaving Office: Date Left/// (Check one)	
The period covered is/, through Decembe 2010.	er 31, O The period covered is January 1, 2010, throuse leaving office.	ıgh the date of
Assuming Office: Date	The period covered is	, through the date
☐ Candidate: Election Year Office sought,	if different than Part 1:	
4. Schedule Summary Check applicable schedules or "None."	► Total number of pages including this cover page:	3
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions –	echedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts - schedule attached	adiledule attached
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - sch	redule attached
-Or-	the same and a second at the s	
None - No reportable is	interests on any schedule	
I certify under penalty of perjury under the laws of the State of Cal	lifornia th	
Date Signed 3/30///	Signati	
(month, day, year)		
	FPPC Toll-Free Helpline: 805/275-3772	www.тррс.са.go

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

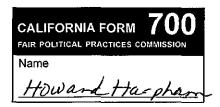
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Howard Harphan

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS, ENTITY
_ Schoolcradt Entermia LLC	Anland Weatern
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
West alexing & Center	REIT
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000
NATURE OF INVESTMENT Bank Out	NATURE OF INVESTMENT RETT
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
3 25 0 10 DISPOSED	9, 184
➤ NAME OF BUSINESS ENTITY /	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
DEIT	REIT
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,000 Over \$1,000,000
NATURE OF INVESTMENT 26IT	NATURE OF INVESTMENT Reit
(Describe) Partnership Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership (Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: N/14-	IF APPLICABLE, LIST DATE:
7 122 18	2 1/2 /2 10
ACQUIRED DISPOSED	ACQUIRED DISPOSED
➤ NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Outsite)	NATURE OF INVESTMENT Stock Other (Describe)
(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

SCHEDULE D Income - Gifts



NAME OF SOURCE	➤ NAME OF SOURCE		
Amorican Sprol Public Affairs			
ADDRESS (Business Address Acceptable) Comma ATPAC	ADDRESS (Business Address Acceptable)		
EHST BOW DIVISION			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
·			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S	3)	
(2,13,10 : 90 Brown			
membrship			
\$	\$	—	
► NAME OF SOURCE	► NAME OF SOURCE		
	·		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S	5)	
	\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{		
/ \$			
► NAME OF SOURCE	► NAME OF SOURCE		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	——	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S	;)	
	\$	——	
		_	
•			
Comments:			